

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEES DETERMINATION | ✓ | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral)... Canceled A Appeal
 - Restricted 0 Objected

| Claim | Final Original | Date |
|-------|-------------------|------|
| 1 | 6 | 9/1 |
| 2 | 17 | 9/2 |
| 3 | 5 | 9/3 |
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| 15 | 1 | |
| 16 | N | |
| 17 | N | |
| 18 | ✓ = | |
| 19 | ✓ | |
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| 26 | ✓ ✓ | |
| 27 | ✓ ✓ | |
| 28 | N | |
| 29 | N | |
| 30 | N | |
| 31 | N | |
| 32 | ✓ ✓ | |
| 33 | ✓ ✓ 0 | |
| 34 | N | |
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| Claim | Final Original | Date |
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| 148 | | |
| 149 | | |
| 150 | | |

If more than 150 claims or 10 actions
staple additional sheet here

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6/2
c1/3